





## JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING DECEMBER 31, 20\_08

## GENERAL INFORMATION

		<b>GENERAL INFORM</b>	ATION	1/2/12/2019	
1.	Name	John N. "Jack" Schroeder		COMMISSION ON ETHICS	
2.	Title	Justice of the Peace, Reno	Township, Dept	. 3	
3.		P. O. Box 30083			
		Reno, NV 89520			
4.	Length of residence	e in Nevada 39 years			
5.		ou are registered to voteWa			
6.	Length of residence	e in the county in which you are registered to			
		IPENSATION FOR EXTRA-JUDI			
	name of the payor, sheets if necessary.  Date	place, and nature of any extra-judicial activity and the amount of the compensation so receive Nature and Place of Activity  None	ed. See Canon 4I(2)(a)(  Name of Payor	Amount	
3.	INCOME  Disclose each source of income received by you and by each member of your household who is 18 years of age or older. No listing of individual clients, customers, or patients is required. Income received from such				
	Attach additional sheets if necessary.			<sup>2</sup> Canon 4I(2)(a)(iii).	
	Washoe C		Recipient		
			Self		
	Washoe C	ounty School District	Spouse		
		Life Insurance (annuities)	Self		
	Knights	of Columbus	Self		

Self

Social Security Administration

## REAL PROPERTY

9.	beneficial interest, and is located in Nev are required – list the street address or	and particular use of any real estate which has a fair market value nal residence, in which you or a member of your household has a legal evada or any adjacent state. See Canon 4I(2)(a)(iv). Specific address r legal description. You must designate whether the property is unit, commercial building, apartments, single-family, rental, etc. Attachartmeter and the second seco		
	Blanca Blk 69, Lot 14	vacant land		
	(Colorado)	A (ICELIT TELL)	Self	
		<u>CREDITORS</u>		
	question 9 above, or (b) the debt is one (	Name of Debtor		
	Clearstar			
	ordarstar	S	elf & Spouse	
	BUS	SINESS ENTITIES		
	List each business entity in which you or a trust, director, officer, owner (in whole or i security representing one percent or more entity. See Canon 4I(2)(a)(vi). Attach addi	member of your household is invo	111 6 ,	
	,		rerson involved	
	-	None		
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## GIFTS, BEQUESTS, FAVORS, OR LOANS

Date	Name and Place of Gift	Name of Donor	Amount
The latest transfer and the same of the sa	None		
			and the second s
And the second s		t days variety programs of a subministration of distributions and approximately a first address of the subministration of the subministra	Management of the second of th
the state of the s			
			_
HEREBY CERTIFY THAT TH	E INFORMATION CONTAINED IN THIS	BOCUMENT IS TRUE AND COM	IPLETE.
		17 11 11	· ·
March 12, 2009	- Ohn	1. Incre -	chreek
Date		Signature	
Land Control Control Control	Court Administrator.		

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700